

# Training Bulletin

## EARTHQUAKE SEMINAR: Emergency Management Response Issues

### Dates:

(ES1-06) March 20-22, 2007  
 (ES2-06) April 3-5, 2007  
 (ES3-06) May 15-17, 2007

### Locations:

Rancho Cordova, OES Headquarters  
 Novato, CA  
 Southern California Region

CSTI's **Earthquake Seminar: Introduction to Emergency Management Response Issues** is a program designed to introduce basic emergency management concepts necessary to manage a jurisdictional response to an earthquake. This two and a half day training program includes a case study and tabletop exercise as well as a number of Emergency Management topics, including:

Earthquake Effects  
 Using SEMS/NIMS in a Disaster Response  
 Ensuring an Effective Field Response  
 Mutual Aid  
 Managing a Sustained Response  
 Improving Recovery Operations

Care and Shelter Considerations  
 EOC Organization and Functions  
 Disaster Communications  
 Mitigation Strategies  
 Continuity of Operations  
 Continuity of Government

### Tuition: \$325.00

**TUITION MUST BE PREPAID.** Tuition payment is due no later than two weeks prior to the start of the course. Late registration will be considered on a case-by-case basis. CSTI accepts checks, money orders, and credit cards (Visa, Mastercard or American Express and ATM cards with either Visa or Master Money/Mastercard logos). Contact Christine Low, CSTI Administration at (805) 549-3599.

Apply immediately using the form below and fax it to (805) 549-3348 or go on online at **www.csti.ca.gov**. An information packet and map will be sent 6-8 weeks prior to the course. For registration questions call the Registrar Peg Ryan at (805) 549-3536, Margaret\_Ryan@oes.ca.gov or for course content, contact the Course Manager Joe Costello at (805) 549-3553, Joe\_Costello@oes.ca.gov.

**Space is limited in this program and early reservations are strongly recommended.**

### EARTHQUAKE SEMINAR

Date: (please specify date) \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Agency: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ SS# \_\_\_\_\_  
 Work Phone: \_\_\_\_\_ FAX: \_\_\_\_\_ E-Mail: \_\_\_\_\_  
 Send Confirmation To: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Describe applicant's professional experience, years of experience, and current position.  
 This information is vital for proper role playing assignments in emergency management courses.

Do you have any disabilities (including special allergies or medical conditions) that require special consideration during your attendance? Yes\_\_\_ No\_\_\_ If so, please indicate on a separate piece of paper.

Please fill out this application and mail or FAX to: CSTI - P.O. Box 8123, San Luis Obispo, CA 93403-8123  
 For registration information contact: Peg Ryan, Registrar, (805) 549-3536, FAX (805) 549-3348